



PATENT

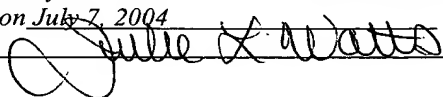
**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s)	Buwalda, et al.	Examiner:	Hendricks, Keith
Serial No.:	09/720,798	Group Art Unit:	1760
Confirmation No.:	5541	Docket:	294-92 PCT/US
Filed:	December 22, 2000	Dated:	July 7, 2004
For:	Salt-Stable Modified Starch		

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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*Commissioner for Patents, P.O. Box 1450, Alexandria,  
VA 22313 on July 7, 2004*

Signature: 

**RESPONSE**

Dear Sir:

In response to a final office action mailed April 7, 2004, Applicants submit the following amendments and remarks for entry in the above-identified application.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 5 of this paper.



ASH/1760  
Blw

Attorney Docket No. 294-92 PCT/US

In re Application of: Buwalda, et al.  
Serial No.: 09/720,798  
Confirmation No.: 5541  
Filed: March 9, 2001  
For: Salt-Stable Modified Starch

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P.O. Box 1450  
Alexandria, Virginia 22313-1450

on July 7, 2004

Signature: Julie L. Watts

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDL. FEE		RATE	ADDL. FEE
TOTAL	* 19	MINUS	** 42	= 0	x 9=	\$		x 18=	\$
INDEP.	* 7	MINUS	*** 4	= 3	x 43=	\$	OR	x 86=	\$258.00
					x 145=	\$		x 290=	\$
					TOTAL	\$ 0.00		TOTAL	\$ 258.00

☐ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- \*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 20, write "20" in this space.
- \*\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 3, write "3" in this space. The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge my Deposit Account No. 08-2461 in the amount of \$258.00. A duplicate copy of this sheet is attached.
- ☐ A check in the amount of \$\_\_\_\_\_ is attached
- ☒ The Commissioner is hereby authorized to charge any fees or additional fees associated with this communication or credit any overpayment to Deposit Account No. 08-2461. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. 1.17.

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Respectfully submitted,

Lauren T. Emr  
Registration No. 46,139